

Deaf/Hard of Hearing Health Fair Committee [DHFC]

University Hospital and University of Cincinnati

Proudly Present...

**Celebrating
Our Culture
of
Courage**

Your Stories

Saturday April 4, 2009

University of Cincinnati
Tangeman Center – The Great Hall
Cincinnati, Ohio 45221

"Celebrating Our Culture of Courage"



April 4, 2009

The DHFC is a group of Deaf, Hard-of-Hearing, and Hearing individuals focusing on education and support systems for deaf, deaf-blind and hard of hearing communities in the prevention of health-related problems.

Topics such as Cancer, Diabetes, Cholesterol, Mental Health Issues, Civil Rights, Dental Care, Communications Technology, Faith, plus other topics will be offered. We will have booths, Interpreters, SSP's and Real-Time captioning.

FREE: All Workshop Sessions
Childcare
Materials
Box lunch - for those who send registrations before
March 26, 2009

Registration: 8 am to 9 am

Events: 9 am to 4:30 pm

PARKING: There is no charge for parking in the CCM Garage. If you park in other garages there will be a charge

For more information contact:

Betty Rosenberger

513-584-3785 TTY/FAX

513-584-5052 Voice

Betty.Rosenberger@Healthall.com

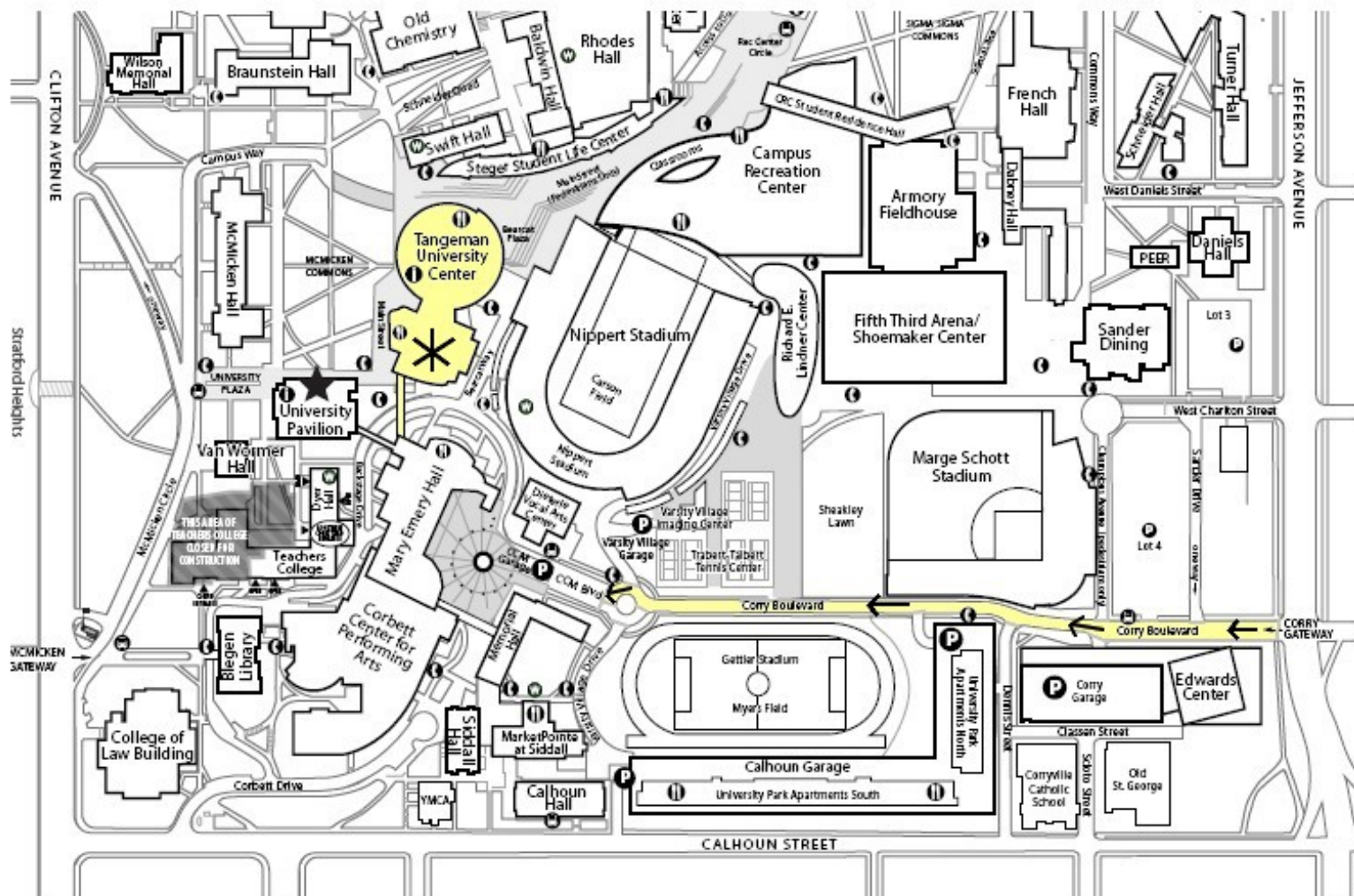
University Hospital

Betty Rosenberger

234 Goodman ML 0707

Cincinnati, OH 45219

Sponsored by: University Hospital, University of Cincinnati Disability Services, Sorenson Communications, Cincinnati Bell, Relay Ohio (Sprint), Relay Kentucky (Hamilton)



Tangeman University Center, Great Hall, 4th floor See last page for driving and parking directions.

PLEASE PRINT CLEARLY

April 4, 2009 9 am – 4:30 pm

Registration: 8am – 9am

First Name: _____

Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: (____) _____ Cell Phone: (____) _____ Work Phone: (____) _____

TTY Voice Both

TTY Voice Both

TTY Voice Both

FAX: (____) _____ E-mail: _____ Video: _____

I am ☐ Deaf ☐ Hard of Hearing ☐ Deaf Blind

☐ Hearing ☐ Hearing Parent of deaf / HH child

I request ☐ Interpreter ☐ Real time Captioning

☐ SSP

Type of Interpreter ☐ Sign ☐ Tactile ☐ Oral



Please check if you want a box lunch ☐ Regular and Vegetarian lunches will be provided. Special dietary needs cannot be met. Please bring your own.

9:30 am Stories

Morning Sessions 11:00 am - 12:00 pm

Pick 1

____ Cancer Q & A

____ Diabetes

____ Safety & Comfort in Your Home

____ Mental Wellness for Adults: Q & A

____ Sorenson Communication

____ Cholesterol

____ Deaf Off Drugs and Alcohol

____ Stinking Thinking: Mental Health

Afternoon Session 1:30 pm – 2:30 pm

Pick 1

____ Women's Health

____ Fire Safety

____ Dental Health

____ HIV/AIDS Education

____ Civil Rights in Health, Social Service & Employment

____ Mental Wellness for Children: Q & A

____ Faith in Your Life

____ Hamilton Relay

Late Afternoon For All

Entertainment

Mail, E-Mail or FAX Registration:

University Hospital, Betty Rosenberger

234 Goodman St ML 0707

Cincinnati, OH 45219

Betty.Rosenberger@Healthall.com

513-584-3785 TTY/FAX

Topics and scheduled times may change to accommodate as many people as we can.

If you have questions about your medications please take them to University Hospital booth.

We will have a variety of booths for you to visit to get more information.

Please Note: Children, Teen & Volunteer registration is on back of this page.

Adult who is responsible for child or children: _____ Relationship: _____
First and last name Mother/Father/Grand Parent Other

CHILDREN'S PROGRAM: All Children must be in childcare or with a parent at all times.

Please list children you will be bringing for childcare. Activities are being planned so it is important to know how many children will be here.

_____	_____	Age ____	Special needs _____
First name	Last name		
_____	_____	Age ____	Special needs _____
First name	Last name		
_____	_____	Age ____	Special needs _____
First name	Last name		
_____	_____	Age ____	Special needs _____
First name	Last name		

TEEN PROGRAM: Please list the teenagers who will be attending.

_____	_____	Age ____	Special needs _____
First name	Last name		
_____	_____	Age ____	Special needs _____
First name	Last name		
_____	_____	Age ____	Special needs _____
First name	Last name		
_____	_____	Age ____	Special needs _____
First name	Last name		

VOLUNTEER OPPORTUNITIES:

If you would like to volunteer to work during the workshop, please check. ☐ Yes Times available: From _____ to _____.

I would like to help with:

☐ Childcare ☐ Serve food ☐ SSP ☐ Greeter ☐ Registration ☐ Set up booths ☐ Take down booths
☐ Other _____

From the north or south via I-75:

From I-75, take the Hopple Street exit (exit 3). (If you are traveling north, Hopple Street exits from the left lane.)

Turn left off the exit onto Hopple Street.

As you cross the first intersection (Central Parkway), Hopple Street becomes Martin Luther King Drive.

Follow Martin Luther King Drive up the hill to Clifton Avenue.

Continue on Martin Luther King Drive to Jefferson Avenue (two more lights).

Turn right on Jefferson Avenue.

Take Jefferson to Corry Street. Turn right onto Corry.

Follow Corry to the bottom of the hill to the entrance of CCM Garage.

From the north via I-71:

Take the Taft Road exit (exit 3).

**Follow Taft Road (one-way) to Jefferson Avenue.

Turn right onto Jefferson.

Corry Street is first street on left.

Follow Corry to the bottom of the hill to the entrance of CCM Garage.

From the south via I-71:

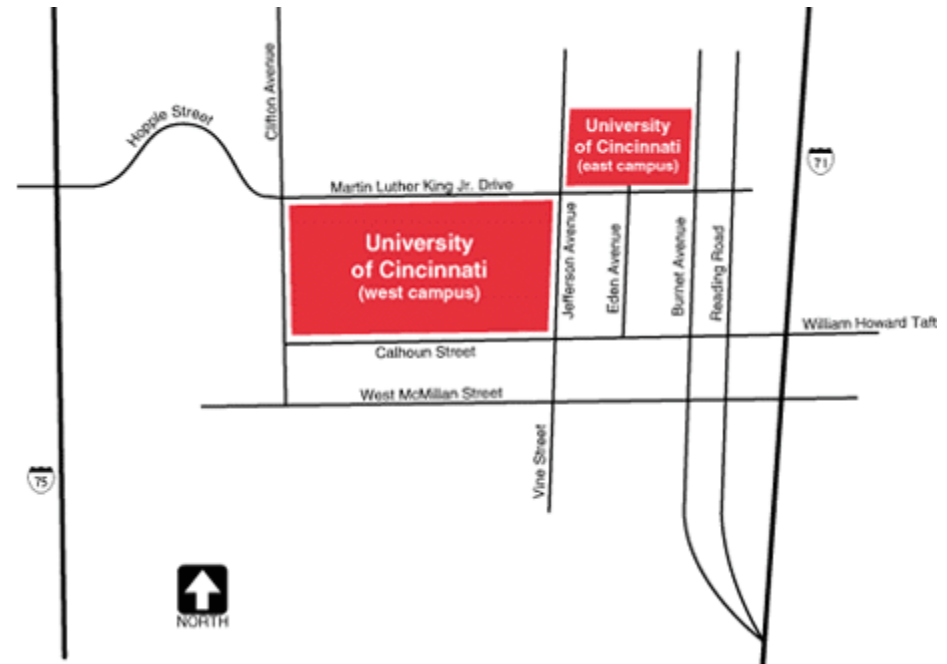
Take the Reading Road Exit (exit 2).

Follow Reading Road to Taft.

Turn left on Taft.

Follow directions above from **.

Once you have parked, follow the signs to Tangeman University Center (TUC) Great Hall.



Metro Information

Bus 15 - 18 - 19 - 51